_				l	
Fi	I in this information to iden	tify your case:			
Ur	nited States Bankruptcy Court	for the:	•		
sc	OUTHERN DISTRICT OF TEX	KAS			
Case number (if known)			hapter 11		
	· · · · · · · · · · · · · · · · · · ·		' <u></u>	☐ Check if this an amended filing	
-					
O.	fficial Form 201				
V	oluntary Petiti	on for Non-Individual	s Filing for Bank	ruptcy	4/19
		n a separate sheet to this form. On the top of the document, <i>Instructions for Bankruptcy I</i>			er (if known).
1.	Debtor's name	MedCare Pedlatric Group, LP			
2.	All other names debtor used in the last 8 years include any assumed	d/b/a MedCare Sports Rehab and Reco MedCare Sports Rehab & Recovery	very		
	names, trade names and doing business as names				
3.	Debtor's federal Employer Identification Number (EIN)	20-4008189		<u></u>	
4.	Debtor's address	Principal place of business	Mailing addres business	s, if different from principal pl	ace of
		12371 S. Kirkwood Road Stafford, TX 77477		•	
		Number, Street, City, State & ZIP Code	P.O. Box, Numb	oer, Street, City, State & ZIP Cod	le
		Fort Bend County	Location of pri place of busine	ncipal assets, if different from ess	principal
		•	Number, Street,	City, State & ZIP Code	
5.	Debtor's website (URL)	http:\medcarepedlatric.com			-
6.	Type of debtor	Corporation (including Limited Liability C	ompany (LLC) and Limited Liability	Partnership (LLP)\	
		☐ Partnership (excluding LLP)	empeny (croy and connect ampliny		
		☐ Other Specify:			

Deb	141 A CA CA CALLA TO A CAT LOS AND AND	roup, LP			Case number (# mown)	,	
	Name			A THE STATE OF THE			
7.	Describe debtor's business	A. Check one:					
		■ Health Care Business (as defined in 11 U.S.C. § 101(27A))					
				(as defined in 11 U.S.C. § 101			
				U.S.C. § 101(44))	•	•	
		☐ Stockbroker (a	as defined i	n 11 U.S.C. § 101(53A))			
		☐ Commodity Br	oker (as de	ofined in 11 U.S.C. § 101(6))			
		☐ Clearing Bank	(as define	d in 11 U.S.C. § 781(3))	,		
		☐ None of the al	00Ve				
		B. Check all that a	ipply	•			
			* *	cribed in 26 U.S.C. §501)			
				- -	vestment vehicle (as defined in 15 U.S.C. §80a-3		
		CONTRACTOR AND AND AND ADDRESS OF THE PARTY OF THE PARTY OF THE PARTY.	Kerkezura albertar brazilia a	ofined in 15 U.S.C. §80b-2(a)(1	1))		
		C. NAICS (North A	Vmerican Ir	dustry Classification System)	I-digit code that best describes debtor.	ORGENSERVER COLORDS TO BRE	
	•		<u>/uscourts.c</u>	ov/four-digit-national-associati	on-naics-codes.	ŧ	
		6216					
8.	Under which chapter of the	Check one:				(*************************************	
	Bankruptcy Code is the debtor filing?	☐ Chapter 7					
	debtor mingr	Chapter 9					
		Chapter 11, C	heck all tha	t apply:			
					liquidated debts (excluding debts owed to inside		
				• • • • • •	subject to adjustment on 4/01/22 and every 3 year	· · · · · · · · · · · · · · · · · · ·	
			bus stat	iness debtor, attach the most r	otor as defined in 11 U.S.C. § 101(51D). If the det ecent balance sheet, statement of operations, car return or if all of these documents do not exist, fo 3).	sh-flow	
				an is being filed with this petitle	i e		
				eptances of the plan were sollo ordance with 11 U.S.C. § 1126	ited prepetition from one or more classes of cred (b).	itors, in	
			Exc atta	hange Commission according	dic reports (for example, 10K and 10Q) with the S to § 13 or 15(d) of the Securities Exchange Act of Ir Non-Individuals Filing for Bankruptcy under Cha	1934, File the	
			☐ The	debtor is a shell company as	defined in the Securities Exchange Act of 1934 Ro	ile 12b-2.	
		☐ Chapter 12		•			
			·/•				
9.	Were prior bankruptcy cases filed by or against the debtor within the last 8 years?	No.					
		☐ Yes.					
	If more than 2 cases, attach a	Distulat		When	Coop musshay		
	separate list.	District			a . 1		
		District	**********	When	Case number		
10.	Are any bankruptcy cases	□ No		-			
	pending or being filed by a business partner or an	Yes.			•		
	affiliate of the debtor?	· y my wark				•	
	List all cases. If more than 1, attach a separate list	Debtor	See Atta	chment	Relationship		
	no need and 3 and seems because any per 384%.	District		When	On an annual section with		

Case 20-31417 Document 1 Filed in TXSB on 03/01/20 Page 3 of 8

DOD	MedCare Pediatr	ic Group, I	LP	Case number (if known	"				
	Va Fle		•						
11.	Why is the case filed in this district?	Check a	Check all that apply: Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.						
		□ A	bankruptcy case concerning d	ebtor's affiliate, general partner, or partners	ship is pending in this district.				
12.	Does the debtor own or have possession of any real property or person property that needs	₩ I40	Answer below for each prope	erty that needs immediate attention. Attach	additional sheets if needed.				
	immediate attention?		Why does the property nee	ed immediate attention? (<i>Check all that ap</i>	oply.)				
			☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or						
				What is the hazard?					
	·		□ It needs to be physically secured or protected from the weather.						
				ds or assets that could quickly deteriorate of meat, dairy, produce, or securities-related	or lose value without attention (for example, assets or other options).				
	•		☐ Other		·				
			Where is the property?						
				Number, Street, City, State & ZIP Code					
			Is the property insured?						
			□No						
			— …						
			□ vec Insurance agency						
	٠		Yes, Insurance agency						
			Contact name						
	Statistical and admin	injetrative i	Contact name Phone						
13.	Statistical and adm		Contact name Phone						
13.	Statistical and adm Debtor's estimation of available funds		Contact name Phone Information Check one:						
13.	Debtor's estimation of	. (Contact name Phone Information Check one: Funds will be available for d	istribution to unsecured creditors.					
13.	Debtor's estimation of	. (Contact name Phone Information Check one: Funds will be available for d						
	Debtor's estimation of		Contact name Phone Information Check one: Funds will be available for d	istribution to unsecured creditors. enses are paid, no funds will be available to	o unsecured creditors.				
	Debtor's estimation of available funds		Contact name Phone Information Check one: Funds will be available for did the straight of t	istribution to unsecured creditors.					
	Debtor's estimation of available funds Estimated number of		Contact name Phone Information Check one: Funds will be available for did the straight of t	istribution to unsecured creditors. enses are paid, no funds will be available to □ 1,000-5,000	o unsecured creditors.				
	Debtor's estimation of available funds Estimated number of		Contact name Phone Information Check one: Funds will be available for di After any administrative exp	istribution to unsecured creditors. enses are paid, no funds will be available to	o unsecured creditors. ☐ 25,001-50,000 ☐ 50,001-100,000				
14.	Debtor's estimation of available funds Estimated number of	. (0 ■ 1-49 □ 50-99 □ 100-1	Contact name Phone Information Check one: Funds will be available for di After any administrative expenses	istribution to unsecured creditors. enses are paid, no funds will be available to	o unsecured creditors. ☐ 25,001-50,000 ☐ 50,001-100,000				
14.	Debtor's estimation of available funds Estimated number of creditors		Contact name Phone Information Check one: Funds will be available for di After any administrative expenses	istribution to unsecured creditors. enses are paid, no funds will be available to 1,000-5,000 5001-10,000 10,001-25,000	o unsecured creditors. ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000				
14.	Debtor's estimation of available funds Estimated number of creditors		Contact name Phone Information Check one: Funds will be available for di After any administrative expenses 99 99 99	istribution to unsecured creditors. enses are paid, no funds will be available to 1,000-5,000 5001-10,000 10,001-25,000	D unsecured creditors. ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion				
14.	Debtor's estimation of available funds Estimated number of creditors	1-49 50-99 100-1 200-9 \$0 - \$ \$50,0 \$100,	Contact name Phone Information Check one: Funds will be available for di After any administrative expenses 99 99 900 101 - \$100,000	istribution to unsecured creditors. enses are paid, no funds will be available to 1,000-5,000 5001-10,000 10,001-25,000	o unsecured creditors. ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion				
14.	Debtor's estimation of available funds Estimated number of creditors	1-49 50-99 100-1 200-9 \$0 - \$ \$50,0 \$100,	Contact name Phone Information Check one: Funds will be available for di After any administrative exp. 99 99 90 101 - \$100,000 001 - \$500,000 001 - \$1 million	istribution to unsecured creditors. enses are paid, no funds will be available to 1,000-5,000 5001-10,000 10,001-25,000 \$1,000,001 - \$10 million \$10,000,001 - \$50 million \$100,000,001 - \$500 million \$100,000,001 - \$500 million	D unsecured creditors. ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion				
14.	Debtor's estimation of available funds Estimated number of creditors Estimated Assets	1-49 50-99 100-1 200-9 \$0 -\$ \$50,0	Contact name Phone Information Check one: Funds will be available for di After any administrative exp. 99 99 90 101 - \$100,000 001 - \$500,000 001 - \$1 million	istribution to unsecured creditors. enses are paid, no funds will be available to 1,000-5,000 5001-10,000 10,001-25,000 \$1,000,001 - \$10 million \$10,000,001 - \$50 million \$100,000,001 - \$500 million \$100,000,001 - \$500 million \$1,000,001 - \$500 million	D unsecured creditors. ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000 ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$50 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
14.	Debtor's estimation of available funds Estimated number of creditors Estimated Assets	1-49 50-99 100-1 200-9 \$50,0 \$50,0 \$50,0	Contact name Phone Information Check one: Funds will be available for di After any administrative exp. 999 990 101 - \$100,000 001 - \$500,000 001 - \$1 million	istribution to unsecured creditors. enses are paid, no funds will be available to 1,000-5,000 5001-10,000 10,001-25,000 \$1,000,001 - \$10 million \$10,000,001 - \$50 million \$100,000,001 - \$500 million \$100,000,001 - \$500 million	D unsecured creditors. D 25,001-50,000 D 50,001-100,000 More than 100,000 D \$500,000,001 - \$1 billion D \$1,000,000,001 - \$50 billion More than \$50 billion D \$500,000,001 - \$1 billion				

Case 20-31417 Document 1 Filed in TXSB on 03/01/20 Page 4 of 8

	MedCare Pedlat Name	ric Group, LP	Proceedings of the Millian Control of the Control o	MAAAAAAAAAAAA	Case number (# known)			
	Request for Relief	, Declaration, and	Signatures	***************************************				
WARNIN			. Making a fatse stateme both, 18 U.S.C. §§ 152,		bankruptcy case can result in fines up to \$500,000 or			
17. Declaration and signatur of authorized representative of debtor		The debtor req	The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. I have been authorized to file this petition on behalf of the debtor.					
		I have examine	I have examined the information in this petition and have a reasonable belief that the information is true and correct.					
		I declare under	penalty of perjury that t	he foregoing is true an	d correct.			
		Executed on	9/2/8/20 MM 108/11/11	<u>) </u>				
		x 7	7	laven	Lauren Palge Kinkade			
			thorized representative	of debter	Printed name			
			lent of Gen. Partner, rlc Group GP, LLC	MedCare				
18. Signal	ture of attorney	X Signature of at	brney for debtor		Date 2/28/20 MM/DD/YYY			
		Matthew B. I	Probus					
		Wauson Pro	bus	· · · · · · · · · · · · · · · · · · ·				
		Sugar Land,						
		Number, Street	, City, State & ZIP Code					
		Contact phone	261-242-0303	Email address	mbprobus@w-plaw.com			
		16341200 TX			_			
		Bar number an	d State					

Debtor	MedCare Pediatric Group, LP	Case number (# known)						
	Name							
Fill in t	nis information to identify your case:							
United 8	States Bankruptcy Court for the:	•			Approximately			
SOUTH	ERN DISTRICT OF TEXAS	Jan			ľ		•	
Case nu	Imber (# known)		Chapter	11_				
						☐ Check if this an amended filing		
		FORM 201. V	OLUNTAF	RY PET	FITION			
		Pending Bankru	iptcy Cas	es Att	achment			
Debtor	MedCare Pediatric Nursing, LP		F	Relations	ship ta you	Affiliate	٠	

Case number, if known

Case number, if known

Case number, if known

Relationship to you

Relationship to you

Affillate

Affiliate

When

When

When

3/01/20

3/01/20

3/01/20

District

Debtor

District

Debtor

District

Southern District of Texas

Southern District of Texas

Southern District of Texas

MedCare Pediatric Therapy, LP

MedCare Pediatric Rehab Center, LP

UNANIMOUS WRITTEN CONSENT OF MEDCARE PEDIATRIC GROUP, LP A Texas Limited Partnership

February 28, 2020

THE UNDERSIGNED, being all of the managers of MedCare Pediatric Group GP, LLC, a Texas limited liability company (the "General Partner"), being the general partner of MedCare Pediatric Group, LP (the "Partnership"), do hereby consent to adoption of the following resolutions:

RESOLVED, that the General Partner of the Partnership have decided that it is in the best interests of the Partnership and its limited partners that the Partnership file for protection under Chapter 11 of the United States Bankruptcy Code.

FURTHER RESOLVED, that:

- 1. The Partnership, by and through the General Partner, is authorized and directed to take such steps as are necessary to file a Chapter 11 petition in the United States Bankruptcy Court for the Southern District of Texas, Houston Division, and all other pleadings necessary to the bankruptcy case.
- 2. The Partnership, by and through the General Partner of this Partnership, is authorized and directed to execute and deliver on behalf of this Partnership and in its name any documents necessary in the course of the bankruptcy case, to hire professionals as are necessary to the case, and to do any and all acts and things necessary to carry out, perform, and consummate a reorganization under Chapter 11 of the United States Bankruptcy Code.

IN WITNESS WHEREOF, the undersigned have executed this Unanimous Written Consent of MedCare Pediatric Group, LP effective as of the date set forth above.

MedCare Pediatric Group GP, LLC, General Partner of MedCare Pediatric Group, LP

Lauren Paige Kinkade, Manager

Steve Wang, Manager

LIST OF CREDITORS

Veritex Bank, N.A. 8214 Westchester Drive, Suite 800 Dallas, Texas 75225

Fort Bend WCID #2 1317 Eugene Heimann Circle Richmond, TX 77469-3623

Wells Fargo P.O.Box 51174 Los Angeles, CA 90051-5474

Wells Fargo Vendor Fin. Serv. P.O. Box 105710 Atlanta, GA 30348-5710

United Healthcare 2000 West Loop South, Suite 900 Houston, Texas 77027

Ultimate Software P.O. Box 930953 Atlanta, GA 31193-0953

Sales Force 415 Mission Street, 3rd Floor San Franisco, CA 94105

TW Telecom/Century Link P.O. Box 910182 Denver, CO 80291-0182

Iron Mountain P.O. Box 915004 Dallas, TX 75391-5004

Sam's Club P.O. Box 960016 Orlando, FL 32896-0016

CIT 21146 Network Place Chicago, IL 60673-1211 Oracle Netsuite P.O. Box 7023 Troy, MI 48007-7023

TIAA Bank P.O. Box 911608 Denver CO 80291

Federal Health Sign Dept # 41283 P.O. Box 650823 Dallas, TX 75265

Republic Waste 13630 Fondren Rd. Houston TX 77085-2012

Haynes & Boone 1221 McKinney St., Suite 2100 Houston, TX 77010-2007

Straus Systems 7 Straus Ct. Stafford, TX 77477

EZ Tag 2707 W Sam Houston Pkwy N Houston, TX 77043

Sharp Business Solutions 7303 W. Sam Houston Pkwy N Houston TX 77040

Hayes Business Solutions P.O. Box 219330 Houston, TX 77218

Pitney Bowes P.O. Box 371874 Pittsburgh PA 15250-7874